

APPENDIX “F-1”



UNION OF B.C. PERFORMERS
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UBCP MINOR’S EMPLOYMENT

A2701(b) Written Consent by Parent or Guardian – For employment as an Performer in the Recorded Media Industry

Date of Consent: _____

| | |
|---|-----------------------|
| Date(s) and Hours of Work: | |
| | |
| Minor’s Information | |
| Full Name: | Date of Birth: |
| Performance Category: | Role (if applicable): |
| Address: | |
| City: | Postal Code: |
| Phone: | Alternate Phone: |
| Talent Agent: | Agent Phone: |
| Production Information | |
| Name: | |
| Location and Hours: | |
| Contact Name and Phone: | |
| Parent/Guardian Declaration | |
| <input type="checkbox"/> I am the parent of this Minor. <input type="checkbox"/> I am the legal guardian of this Minor. | |
| <input type="checkbox"/> I have read and am familiar with the terms and conditions of the collective agreement. | |
| <input type="checkbox"/> I agree to supervise the Minor or have a chaperone, nineteen years (19) of age or older, supervise the Minor at all times while the Minor is on set. | |
| <input type="checkbox"/> I understand that I am responsible for the Minor’s well-being and safety at all times the Minor is working. | |
| <input type="checkbox"/> I understand it is my responsibility to ensure that the Minor maintains the requirements of his/her educational program. | |
| <input type="checkbox"/> I noted the specifics of location, hours of work and type of work. | |
| This is my written consent for my child to be employed as a Performer on the above referenced production. | |
| Name: | Signature: |
| Address (if different than Minor): | |
| City: | Postal Code: |
| Phone: | Alternate Phone: |

This written consent must be obtained by the production and retained as employment records.

Parent/Guardian should retain a copy for own records.